Additional file 1. Assumptions used in the decision model

Point of reference / population

All persons living in an area or region that:

- 1) meets REMO criteria for mass treatment with Mectizan® (i.e., considered hyperor meso-endemic for onchocerciasis)
- 2) appears to be "at risk" for loiasis based on the environmental risk model map
- 3) has not yet received Mectizan® mass treatment

Timeframe

Risks of onchocerciasis, onchocercal blindness, onchocercal skin disease, and treatment-associated *Loa* encephalopathy are considered as lifetime risks.

Once a community and an individual begin annual Mectizan® treatment, they continue 'forever'.

Endemicity of Onchocerciasis

High-risk scenario	Low-risk scenario
60%	30%
30%	30%
10%	40%
	60% 30%

Endemicity of Loiasis

Distribution of Loa loa infection risk, by community

	High-risk	Low-risk
Percentage of communities in which no one has <i>L. loa</i>	40%	90%
microfilaremia of $\geq 30,000$ per ml		
Percentage of communities in which $0.1 - 0.9\%$ of persons	35%	7%
have L. loa microfilaremia of $\geq 30,000$ per ml		
Percentage of communities in which 1.0 – 1.9% of persons	15%	3%
have L. loa microfilaremia of $\geq 30,000$ per ml		
Percentage of communities in which 2.0 – 3.9% of persons	7%	0
have L. loa microfilaremia of $\geq 30,000$ per ml		
Percentage of communities in which 4.0 – 7.9 % of persons	3	0
have L. loa microfilaremia of $\geq 30,000$ per ml		
Percentage of communities in which $\geq 8\%$ of persons have L.	0	0
loa microfilaremia of ≥30,000 per ml		

Prevalence of individuals with > 30,000 mf per ml, based on community risk (mid-point assumption).

– in communities where no one has L. loa microfilaremia of $\ge 30,000$	
Percentage of individuals who have L. loa microfilaremia of \geq 30,000 per ml	0.5%
– in communities where $0.1 - 0.9\%$ of persons have L. loa microfilaremia of	
≥30,000	
Percentage of individuals who have L. loa microfilaremia of $\ge 30,000$ per ml	1.5%
- in communities where 1.0-1.9% of persons have <i>L. loa</i> microfilaremia of	
>30,000	
Percentage of individuals who have <i>L. loa</i> microfilaremia of $\ge 30,000$ per ml	3.0%
– in communities where $2.0 - 3.9\%$ of persons have L. loa microfilaremia of	
≥30,000	
Percentage of individuals who have L. loa microfilaremia of ≥30,000 per ml	6.0%
- in communities where $4.0 - 7.9\%$ of persons have L. loa microfilaremia of	
>30,000	
Percentage of individuals who have <i>L. loa</i> microfilaremia of $\ge 30,000$ per ml	10%
- in communities where $\geq 8\%$ of persons have <i>L. loa</i> microfilaremia of	
>30,000	

Performance of RAPLOA (estimates based on Figure 1).

	RAPLOA-40	RAPLOA-20
Probability of community testing RAPLOA-positive in which no	5%	50%
one has L. loa microfilaremia of \geq 30,000 per ml (1 – specificity)		
Probability of community testing RAPLOA-positive in which 0 –	50%	100%
0.9% of persons have <i>L. loa</i> microfilaremia of $\ge 30,000$ per ml		
Probability of community testing RAPLOA-positive in which 1 –	70%	100%
1.9 % of persons have <i>L. loa</i> microfilaremia of \ge 30,000 per ml		
Probability of community testing RAPLOA-positive in which	100%	100%
\geq 2% of persons have <i>L. loa</i> microfilaremia of \geq 30,000 per ml		
Sonsitivity in detecting notentially 'et risk' communities	50 - 100%	100%
Sensitivity in detecting potentially 'at risk' communities		
Specificity in detecting potentially 'at risk' communities	95%	50%

Risk of Onchocercal Disease in the Absence of Treatment
Mean lifetime risk of blindness in persons born into and living in areas:

Hyper-endemic for onchocerciasis	25%
Meso-endemic for onchocerciasis	5%
Hypo-endemic for onchocerciasis	1%

Mean lifetime risk of skin disease in persons born into and living in areas:

Hyper-endemic for onchocerciasis	50%
Meso-endemic for onchocerciasis	30%
Hypo-endemic for onchocerciasis	15%

Note: these figures would underestimate risk of skin disease in areas where the sowda form of onchocerciasis predominates.

Drug coverage

Coverage with mass Mectizan® treatment in hyper- and meso-endemic communities is 65% of total population.

Coverage with passive (individual) Mectizan ${\mathbb R}$ treatment in hypo-endemic communities is 10% of total population.

Once an individual begins to takes Mectizan®, he/she continues 'forever'. Compliance with annual Mectizan® is systematic (i.e., the same 65% of the population receives Mectizan® every year).

Benefits of treatment with Mectizan®

Risk of new blindness in persons treated annually with Mectizan® if they had no previous posterior segment eye lesions: 0%

Risk of future skin disease in persons treated annually with Mectizan®: 0%

Risks of treatment with Mectizan®

Risks other than *L. loa* encephalopathy not considered.

L. loa encephalopathy does not occur in persons with microfilarial density of <30,000 per ml blood.

Risk of L. loa encephalopathy following the first Mectizan® treatment in persons with L. loa microfilarial density of \geq 30,000: 1%

Risk of *L. loa* encephalopathy following the second annual Mectizan® treatment in persons who initially (pre-first-year treatment) had *L. loa* microfilarial density of \geq 30,000: 0.1%

Risk of L. loa encephalopathy following third and subsequent annual Mectizan® treatment in persons who initially (pre-first-year treatment) had L. loa microfilarial density of >30,000: 0%

Risk of permanent sequelae of L. loa encephalopathy

Risk of dying from L. loa encephalopathy without supportive care: 50%

Risk of dying from L. loa encephalopathy with supportive care: 5%

Risk of permanent neurologic sequelae following $L.\ loa$ encephalopathy in the absence of supportive care: 25%

Risk of permanent neurologic sequelae following $L.\ loa$ encephalopathy if the patient receives supportive care*: 5%

Values for disability-adjusted life years (DALYs) lost for specific conditions

Death	20
L. loa encephalopathy	0.2
Permanent neurologic sequelae following <i>L. loa</i> encephalopathy	10
Onchocercal blindness	8.3
Onchocercal skin disease	0.34

^{*} Supportive care includes hydration, skin care, eye care, anti-infective treatment for nosocomial infections and rehabilitation.